ne made Sensi depositi	- Under the Paperwerk R PATEN	eduction Act of 1999	i, no persons um s	regulard to respon	II.S. Palent and	Info-	for use the filter: U.S.	DEPARTIVENT	'0/58/06 (08-0: OMB 0651-00: OF COMMERC)) 2 England - Sandar
•	PATEN		ON FEE DE		ON RECORD)	-043 H UIS	stion or Docket N	COORTION INCOME.	نهمتر خر <u>مها</u> م
	c	LAIMS AS FILE	D-PARTI				1.6	11007475		4
•	FOR	(Column 1		(Cotumn 2)	SMALL ENTITY		OR Ti	OTHER THAN SMALL ENTITY		
•	BASIC FEE (37 CFR 1.16(a))	MORDER PIL	ED NU	MBER EXTRA	RATE	FEE	-	RATE	FEE]
	TOTAL CLAIMS (37 CFR 1.16(c))	. minu	s 20 ·		x s e	 	OR	N	<u> </u>	-
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	minu			X \$	 	OR	X 5	 	-
	MULTIPLE DEPENDENT CI	ALM PRESENT	(37 CFR 1.16(d)))	+se		OR	+:		-
	* If the difference in column	n 1 is less than zero	, enter °0° in colun	nn 2.	TOTAL		OR	TOTAL		1
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		olumn 1)	Column 2) (Column 3)	SMALL	ENTITY	OR.	OTHER SMALL	THAN	;
: .	RE	MAINING AFTER	HIGHEST MIMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TICNAL]	FATE	ADDI- TRUMAL	
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	FIRST PRESENTATION	OF MULTIPLE DEPEN	DENT CLAIM (37	CFR 1.16(d))	+; /80_ TOTAL	 \	OR ·	+.360		1
	8-24-05 100	lumn 1)	(Cat a		ADD'L FEE		OR	ADDL FEE		
·•	C REAL AME	LAIMS VAINING FTER NOMENT	(Coturn 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT.	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
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		Minus	ئـــا		× 100 =	,	OR	x & 200 =		
	FIRST PRESENTATION C	F MULTIPLE DEPEN	DENT CLAIM (37 C	FR 1.16(d))	+s =. TOTAL ADO'L FEE		OR .	+s =		
	(Cot.	mn 1)	(Column 2)	(Column 3)	Acres 1		OR . i	ADD'L FEE		
	REM.	AIMS AIMING TER DMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL	Ì	RATE	ADDI- TIONAL	
	Total (pr CFR 1.10(d) Z Independent	Minus	••	-	X \$ =	*FEE	OR	x 5 =	FEE	
	Ш 07 OR 1.1600	Minus	•••	-	X \$ =		•		1.	
	FIRST PRESENTATION OF	MULTIPLE DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+s_ =		_	+ \$		
	* If the entry in column 1 is	S lace than the			ADD'L FEE			TOTAL ADDLFEE		

* If the entry in column 1 is less than the entry in column 2, write 10" in column 3.

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the public which is to

If you need essistance in completing the form, call 1-800-PTO-9199 and select option 2